

IOD

Maine Revenue Services Initiator of Deposit Deposit Transaction Fund Reconciliation

43700000

Registration No.	Period Begin	Period End	Due Date

1. Entity Information

ADDRESS CHANGE?: If your address above is incorrect, please make the appropriate changes to the preprinted address.

Use this area only to report changes in your business

2. **OUT OF BUSINESS?** Check here ☐ Date closed: _____
Return permit to Maine Revenue Services

3. **OWNERSHIP CHANGE?** If you have changed ownership, indicate the date when this occurred here _____ and check off type of change below:

☐ Incorporated
☐ Other (explain on reverse)
☐ Sold to _____

☐ Partner added or dropped

4. **NAME CHANGE?** Attach explanation to this return.

Do Not Use Red Ink!

Part I.

1. Total number of nonrefillable beverage containers sold during the reporting period

2. Total number of nonrefillable beverage containers redeemed during the reporting period

1. , ,

2. , ,

ROUND ALL AMOUNTS TO THE NEAREST FULL DOLLAR

Deposit Transaction Fund Balance Amount Calculation

3. Beginning Deposit Transaction Fund balance. (Line 11 from last month's return)

4. Deposit Transaction Fund interest earned last month. (Line 9 from last month's return)

5. Abandoned Deposits payable to the State last month. (Line 15 from last month's return)

6. Reimbursed amounts due from the State last month. (Line 22 from last month's return)

7. Subtotal. (Line 3 - Line 4 - Line 5 + Line 6)

8. Refund values (deposits) received this month.

9. Deposit Transaction Fund interest earned this month.

10. Refund values (deposits) paid this month. Enter as a positive number

11. Ending Deposit Transaction Fund balance. (Line 7 + Line 8 + Line 9 - Line 10)

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4. , ,

5. , ,

6. , ,

7. , ,

8. , ,

9. , ,

10. , ,

11. , ,

Part II.

ROUND ALL AMOUNTS TO THE NEAREST FULL DOLLAR

Abandoned Deposits

ONLY COMPLETE THIS SECTION IF THE DEPOSIT TRANSACTION FUND BALANCE ON LINE 11 IS A POSITIVE NUMBER

12. Deposit Transaction Fund ending balance. (Line 11 from Part I)

12.

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13. Deposit Transaction Fund interest earned this month. (Line 9 from Part I)

13.

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14. Refund values received in the current and two preceding months. (Line 8 from this and the two previous month's returns)

14.

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15. Abandoned Deposits due to the State. (Line 12 - Line 13 - Line 14) IF NEGATIVE, ENTER ZERO.

15.

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Reimbursements

ONLY COMPLETE THIS SECTION IF THE DEPOSIT TRANSACTION FUND BALANCE ON LINE 11 IS A NEGATIVE NUMBER

16. Enter the amount from Line 11 (in Part I) as a positive number.

16.

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17. Deposit Transaction Fund interest earned this month. (Line 9 from Part I)

17.

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18. Subtotal of Deposit Transaction Fund balance excluding interest. (Line 16 + Line 17)

18.

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19. Abandoned deposits amounts payable to the State in the preceding 24 months.

19.

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(Line 15 on the last 24 returns)

20. Reimbursement amounts due from the State in the preceding 24 months.

20.

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(Line 22 on the last 24 returns)

21. Subtotal. (Line 19 - Line 20)

21.

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22. Reimbursement. (The SMALLER of Line 18 or Line 21)

22.

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Mail To:
Maine Revenue Service
P.O. Box 1064
Augusta, ME 04332-1064

Signature and Title

Print Name

Date

Phone #